

**2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L09000100758

**Entity Name:** KAREN FORBES, D.V.M., P.L.

**Current Principal Place of Business:**

14425 64TH CT N.  
LOXAHATCHEE, FL 33470

**Current Mailing Address:**

14425 64TH CT N.  
LOXAHATCHEE, FL 33470 US

**FEI Number:** 27-1138612

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

FORBES, KAREN L  
14425 64TH CT N.  
LOXAHATCHEE, FL 33470 US

*The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.*

**SIGNATURE:** KAREN FORBES

02/01/2023

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title MGRM  
Name FORBES, KAREN L  
Address 14425 64TH CT N.  
City-State-Zip: LOXAHATCHEE FL 33470

*I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** KAREN FORBES

OWNER

02/01/2023

Electronic Signature of Signing Authorized Person(s) Detail

Date